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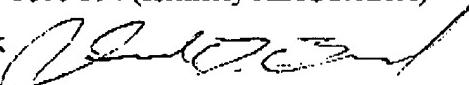
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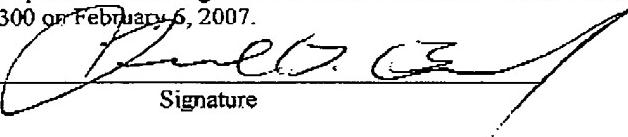
DATE: February 6, 2007
 TO: Examiner Jason M. SIMS
 Group Art Unit 1631
 Mail Stop Amendment
 Commissioner for Patents
 P. O. Box 1450
 Alexandria, VA 22313-1450
 RE: U.S. Patent Application No. 10/611,414
 Filed: June 30, 2003
 Confirmation No.: 1954
 Attorney Docket No.: 5010-394 (formerly ABIOS.021A)
 FROM: Leonard D. Bowersox 
 FAC. NO.: (571) 273-8300

NUMBER OF PAGES (INCLUDING THIS COVER SHEET): 33

Items Attached: Transmittal Form 1 Page
 Fee Transmittal 1 Page
 Petition for Two-Month Extension of Time 1 Page
 Credit Card Payment Form for \$450.00
 Amendment 28 Pages

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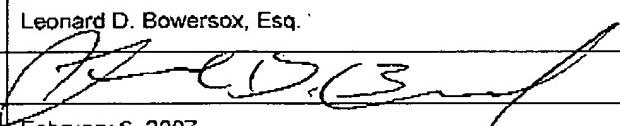
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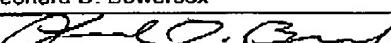
TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number		10/611,414
		Filing Date		June 30, 2003
		First Named Inventor		David P. HOLDEN
		Group Art Unit		1631
		Examiner Name		Jason M. SIMS
Total Number of Pages in This Submission	32	Attorney Docket Number	5010-394 (formerly ABIOS.021A)	
ENCLOSURES (check all that apply)				
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input checked="" type="checkbox"/> Petition for Two-Month Extension of Time <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Acknowledgement Postcard <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Credit Card Payment Form \$450.00 Customer No. 35411	
Remarks				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Leonard D. Bowersox, Esq.		
Signature			
Date	February 6, 2007		

CERTIFICATE OF MAILING

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Type or printed name	Leonard D. Bowersox		
Signature		Date	February 6, 2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04)

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Effective on 12/8/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL
For FY 2006** Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$450.00)

Complete if Known

Application Number 10/611,414

Filing Date June 30, 2003

First Named Inventor David P. HOLDEN

Examiner Name Jason M. SIMS

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<input type="checkbox"/>	Art Unit	1631
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- Deposit Account Deposit Account Number 50-0925 Deposit Account Name: Kilyk & Bowersox, P.L.L.C.
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Small Entity

Fee (\$)

Fee (\$)

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple dependent claims

360 180

Total Claims

Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP = 0	x	=

Multiple Dependent Claims

Fee (\$)	Fee Paid (\$)
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HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
1	- 3 or HP = 0	x	=

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

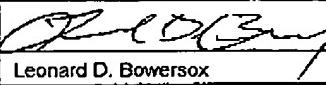
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number)	x	=

4. OTHER FEE(S)

Petition for Two-Month Extension of Time Fee	Fees Paid (\$)
	450.00

SUBMITTED BY

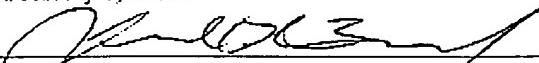
Signature		Registration No. (Attorney/Agent) 33,226	Telephone 703-385-9688
Name (Print/Type)	Leonard D. Bowersox	Date February 6, 2007	

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